## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10651 448

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			4					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS					*			X\$ 9=		OR	X\$18≃	l
INDEPENDENT CLAIMS			mi	nus 3 =	*			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280≃	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				<u></u>	TOTAL	375	OR	TOTAL	
CLAIMS AS AMENDED - PART II										J	OTHER	THAN
		(Column 1)	(Colum					SMALL ENTITY		OR	R SMALL ENTITY	
<b>AMENDMENT A</b>		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	·	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus					X42=		OR	X84≈	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											, 10011. 1 221	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
\ME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		T CLAIM		I  -	.110			. 220	
							L	+140= TOTAL		OR	+280= TOTAL	
							ΑE	DDIT. FEE		OR	ADDIT. FEE	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T OL 4114	=		X42=		OR	X84=	
Щ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL ADDIT. FEE	
		nber Previously Pa					er found	d in the app	propriate bo	k in co	lumn 1.	